

ence, and which will significantly contribute to achieving the key conference goal: to provide women at risk for osteoporosis with the information and incentives needed to prevent osteoporosis. The conference co-sponsors, who have a strategic role in developing and promoting preventive interventions for people at risk for osteoporosis, were the FDA Advisory Group on Women's Health Issues, PHS Coordinating Committee on Women's Health Issues, NIH Advisory Committee on Women's Health Issues, Office of Disease Prevention and Health Promotion, National Institute on Aging, National Institute of Arthritis and Musculoskeletal and Skin Diseases, National Institute of Diabetes and Digestive and Kidney Diseases, and National Osteoporosis Foundation.

Notable acknowledgment is also given to the many public health professionals and organizations that participated in the FDA Special Topic Conference on Osteoporosis, and through whose efforts the essential messages presented in these proceedings will be incorporated into community programs for the benefit and well-being of women's health.

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FOREWORD

It was not too long ago that osteoporosis was a little known, and even less understood, disease condition. The all-too-familiar image of an older woman, stooped over with a cane, had become entrenched as a popular health stereotype, promoting misinformation and misconceptions about aging, osteoporosis, and disease prevention. This stereotype perpetuated a myth: osteoporosis—a serious, debilitating condition affecting approximately 20 million Americans and costing an estimated \$7-\$10 billion annually in health care costs and lost productivity—was portrayed as an unavoidable, inevitable part of growing old.

Scientific and medical research in the diagnosis, prevention, and treatment of osteoporosis has tremendously advanced our ability to better understand this condition, to identify who is at risk, and to actively intervene to reduce the debilitating impact of this serious disease condition. Both public and private sector events, such as the FDA Special Topic Conference on Osteoporosis, the 1984 NIH Consensus Development Conference on Osteoporosis, and National Osteoporosis Prevention Week (sponsored annually by the National Osteoporosis Foundation), continue to erode the stereotypes surrounding this condition and to focus national and international attention on specific prevention-intervention.

How to prevent osteoporosis becomes a particularly important question—worthy of consistent emphasis and continued research—as we realize that osteoporosis causes 1.3 million fractures, including 247,000 hip fractures, every year. Not only do hip fractures increase the older woman's chances of being institutionalized, but there is also a high mortality rate associated with these fractures. Of the patients who experience hip fractures, according to Dr. Stephen Cummings, 20 percent die within the first year, 20 percent become

totally dependent, 25 percent partially dependent, and only 30–35 percent recover independence after that first year (1).

The proceedings of the 1987 FDA Special Topic Conference on Osteoporosis are intended to assist Americans in their individual efforts to sustain the quality of life, health, and well-being in their older years. Under the leadership of FDA Commissioner Frank E. Young, MD, PhD, the conference undertook the arduous goal of bridging the gap between a rapidly evolving science and the public which can most benefit from this new knowledge. The essential bridge narrowing the misinformation, exaggerations, and confusion—too often characteristic of a widening chasm between science and the consumer—are those key individuals within the community who are a primary source of the information, support, and incentives needed to change unhealthy beliefs and behavior. The health care provider can effectively apply this new knowledge for appropriate intervention at target ages. The health educator can have a positive impact by promoting “good health models” and developing creative and innovative ways for reaching target audiences. The health reporter can disseminate information so as to focus attention and prompt needed action. Individuals and their families must have courage and determination to put into action the critical intervention necessary to prevent osteoporosis. It is the committed efforts of these individuals in communities throughout the United States that will determine to a large degree the success of this endeavor.

There are indeed many factors within our society that must eventually converge if we as a nation are to enhance the quality of being old in America. The 1987 FDA Special Topic Conference on Osteoporosis was undoubtedly important in its focus, and will hopefully be successful in realizing the ultimate impact of its message. While the proceedings in this issue are an invaluable source of knowledge, it is only through our sustained efforts as members of the public health community, and our specific health messages, that we will be able to realize an authentic difference in osteoporosis prevention.

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1. Cummings, S., et al.: Osteoporotic fractures: risks, preventive strategies and policies. Aging Health Policy Center, University of California, San Francisco, 1984.